

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I								SMALL ENTITY		OTHER THAN		
			(Column 1)		(Column 2)		7	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			43			and an artist and artist and artist and artist and artist and artist and artist artist and artist artist and artist artis		RATE	FEE		RATE	FEE
FOR .			NUMBER FILED		NUMBI	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			43 minus 20=		. 23			X\$ 9=		OR	X\$18=	414'.
INDEPENDENT CLAIMS			2 minus 3 =					X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	,
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL.	1124	
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)		(Colu	mn 2)			SMALL E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST 1BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AINA	=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	OLTIPLE DEF	ENDEN	I CLAIM		, [+135=		OR	+270=	
							1	TOTAL		OR	TOTAL	
								ADDIT. FEE		10,,	ADDIT. FEE	
_	(·	(Column 1) CLAIMS			ımn 2) HEST	(Column 3)	١,					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUI PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=	↓	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	OLTIPLE DE	PENUEN	II CLAIM		.	+135=		OR	+270=	
							ı	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
1		(Column 1)		(Colu	umn 2)	(Column 3))					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NU PREV	HEST MBER VIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=]	X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X40=		1	X80=	
<	FIRST PRESE	ENTATION OF N	NULTIPLE DE	PENDE	NT CLAIM	1]		ļ	OR	<u> </u>	 -
			Ab a small size	^ .	ian "O" in -	oluma 2		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												E
1	The "Highest Nur	mher Previously P	aid For" (Total o	r Indener	ndent) is th	e highest numb	oer fo	und in the ap	propriate bo	x in co	olumn 1.	